

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION:	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		15	12/01
FORMALITY REVIEW	H.S	866	01-25-00
RESPONSE FORMALITY REVIEW	not	571	04/26/01

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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